

N04 0000008847

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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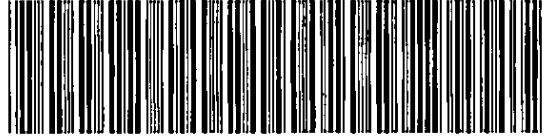
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

JUL 29 2020

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: THE REDEEMED CHRISTIAN CHURCH OF GOD, STRONG TOWER PARISH  
Name of Corporation

DOCUMENT NUMBER: N04000008847

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DEACONESS IRENE DANSO  
Name of Contact Person

THE REDEEMED CHRISTIAN CHURCH OF GOD, STRONG TOWER PARISH  
Firm/Company

8358 W. OAKLAND PARK BLVD. SUITE 205  
Address

SUNRISE, FLORIDA 33351  
City/State and Zip Code

iredanso@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DEACONESS IRENE DANSO at (305) 610-8146  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: THE REDEEMED CHRISTIAN CHURCH OF GOD STRONG TOWER PARISH, INC
2. The principal office address: 8358 W. OAKLAND PARK BLVD SUITE 205  
SUNRISE FLORIDA 33351
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: SEPTEMBER 4, 2004 Document number: N04000008847
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

PASTOR CHRIS E. OGALI  
6249 NW 190TH TERRACE  
MIAMI FLORIDA 33015

SECRETARY OF STATE  
TALLAHASSEE, FL

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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

DEACONESS IRENE DANSO  
8358 W. OAKLAND PARK BLVD SUITE 205  
P.O. Box NOT acceptable  
SUNRISE, FLORIDA 33351

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

IRD  
Signature of an officer or director

DEACONESS IRENE DANSO  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

IRD  
Signature of Registered Agent

7/18/2020  
Date

If signing on behalf of an entity:

DEACONESS IRENE DANSO  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (04/13)